

# Joint Commonwealth/State Disaster Recovery Funding Arrangements Freight Subsidy Application ANIMALS REMOVED FROM A DISASTER DECLARED PROPERTY ORIGINAL APPLICATIONS MUST BE LODGED WITH THE BRISBANE HEAD OFFICE WITHIN SIX MONTHS OF THE DATE OF MOVEMENT



## A. APPLICANT DETAILS (Sections A, B and C to be completed by the applicant)

NAME OF OWNER		HEAD OFFICE USE ONLY
TRADING NAME		CLAIM NUMBER
POSTAL ADDRESS		
(for forwarding of cheque)	POSTCODE:	CLIENT ID NUMBER
PHONE NUMBER: ( )	FAX NUMBER: ( )	
EMAIL ADDRESS:		

### **B.** CONSIGNMENT DETAILS

NAME OF PROI ANIMALS WE	PERTY WHERE RE REMOVED		LOCATION		PROPERTY I	DENTIFICATION	N CODE (PIC)
					Q		
DATE OF MOVEMENT	TO:- PROPERTY NAME / SALEYARD	PROPERTY ID CODE (PIC)	NO & TYPE OF STOCK	LOADED DISTANCE KM	NO. OF DECKS AND LENGTH	FREIGHT COSTS (\$)	GST COMPONENT OF FREIGHT COST (\$)

#### REASON FOR REMOVAL - Please refer to Point 2 in the Removal of Livestock Guidelines

#### C. APPLICANT'S DECLARATION

# I/We (full name/s) ..... of .....

in the State of Queensland, being the owner of the stock referred to on this form, do hereby declare that we are eligible for Freight Subsidy Assistance for animals removed from our property after it was officially disaster declared.

- 1. I/we are not hobby farmers and the property, described previously, is not a hobby farm and is used for the purpose of primary production; and
- 2. my/our Australian Business Number (ABN) is: .....
- 3. the distance for the movement is the shortest practicable route; and
- 4. I have received a copy of the guidelines "*Removal of Stock Associated with a Natural Disaster Event*", (also available on the Department of Agriculture, Fisheries and Forestry website) and this application complies with the conditions and requirements detailed as at the date/s of consignment; and
- 5. the particulars provided on this form and associated with this application are true and correct.
- 6. In order to assess your claim and make an informed decision on your eligibility for disaster assistance the Department will need to confirm the details you have provided on this form with the details you have previously provided for inclusion into the APS database. Your details will not be accessed or used for any other purpose other then to assist in assessing your claim.

Do you consent to authorised officers accessing and confirming your details in the APS database?	Yes	No
	(Please	Circle)

Signed:	(Owner or Manager for the Owner)	Witness	
Declared	at on		

The Department of Agriculture, Fisheries and Forestry is collecting information, including personal information, on this form for the purpose of assisting authorised departmental officers to process your claims related to the freight subsidies available under the Disaster Recovery Funding Arrangements. The information you provide on this form will be used for this purpose only. Your personal information will not be used or disclosed to third parties. Only authorised departmental officers will have access to this information. Your personal information will not be disclosed to any other third party without your consent, unless the disclosure is authorised or required by law.

# All claim forms must be sent direct to

Disaster Recovery Funding Arrangements Freight Subsidies Department of Agriculture, Fisheries and Forestry Level 6 GPO Box 46 Brisbane Qld 4001